CCW Case Manager Support Call Notes

AGENDA

Program Updates

- Participant-Directed Timesheets
- Case Closures Notifying Providers and Completing Documentation
- Patience when Submitting Service Plans
- Assisted Living Facility Agreements
- On Hold Acknowledgement Tasks
- Purpose of Participant Agreement Form
- Identifying Backup Case Managers
- CCW Transition Checklist
- Provider Certification Expiration Notification in EMWS
- Monthly Training Session Community Choices Waiver (CCW) Agreement <u>Slidedeck</u>

TOPICS

Participant-Directed Timesheet

The Employer of Record (EOR) is the only individual who can approve a participant-directed employee's timesheet. No other individual, including the case manager or employee, can complete this task. If the case manager approves an employee timesheet, they may be considered a co-employer and be held legally responsible for the employee. This type of relationship is prohibited under home and community-based policies.

Case managers are responsible for reviewing and monitoring participant-directed services to ensure that the EOR is not allowing others to approve timesheets, and to ensure that the employee is providing the service in accordance with the definition outlined in the CCW Service Index.

Case Closures - Notifying Providers and Completing Documentation

Case managers must ensure providers are notified when a participant's case closes. When a case is closed in the Electronic Medicaid Waiver System (EMWS), providers will receive a notification through the Wyoming Health Provider (WHP) portal; however, they will *only* receive the notification if the closure status in EMWS reads "Pending BMS." "Pending BMS" status means that the case manager, Benefits and Eligibility Specialist (BES), and Medicaid Long Term Care (LTC) worker have acknowledged the closure tasks in EMWS. If this status is not in place, providers will not be notified of the closure.

Case managers must monitor the closure status to ensure that the closure doesn't linger in EMWS. Please monitor closures carefully and contact the BES if a closure seems to be delayed. If the closure isn't complete in EMWS within seven (7) business days, the case manager must contact the provider to notify them of the closure. A best practice is to email the provider agency as soon as a case closure is initiated to ensure the provider is aware and does not continue to provide services. As a reminder, if participant-directed services are on the service plan, the case manager must also ensure that the FMS Change Notification form is sent to ACES\$.

The case manager must continue to complete and submit the Case Management Monthly Review Form (CMMR) if a case is closing. EMWS will continue to initiate the CMMR task until the closure is finalized. To submit a CMMR that does not contain documentation, select the *Failed Contact* option, which will remove many of the questions. Mark any remaining questions as N/A, and add a note to state the case is closing and no contact was made. Once this is done, submit the CMMR.

Patience When Submitting Service Plans

Case managers should only submit service plans one time. When the plan is submitted, please be patient and allow time for EMWS to respond. Clicking *Submit* again prevents EMWS from sending the service plan to the Benefits Management System (BMS), which can delay the participant's services.

Assisted Living Facility Agreements

If a participant goes into an assisted living facility (ALF) and the case manager does not have the ALF agreement, they must upload a document stating that they will upload the ALF agreement once it is received from the ALF. Once the case manager receives the ALF agreement, they will need to create a service plan modification to upload the ALF agreement within the service referral.

On Hold Acknowledgement Tasks

Case managers must keep track of participant cases that are on hold. When a participant case is placed on hold, the provider should acknowledge the hold within two (2) business days. If the provider does not acknowledge within the two day time frame, the case manager should file a complaint using the online complaint portal located on the homepage of the Division website.

Case managers should not use the On Hold process in place of a case closure. In accordance with the CCW Agreement with the Centers for Medicare and Medicaid Services (CMS), if a participant has not received services at least monthly, the case manager must close their case.

Purpose of Participant Agreement Forms

The purpose of the Participant Agreement Form is for the participant to acknowledge with their signature that the case manager discussed the service plan or service plan modification with them, and that the participant agrees to the service plan or identified modification. Once the case manager completes the service plan or modification in EMWS, it is necessary for them to select "Print Participant Service Plan Summary" in order to print the service plan and Participant Agreement Form. The entire form, not just the signature page, must be uploaded into the Participant Agreement section. The EMWS programmers will be updating the Participant Agreement Form in the coming months.

Identifying Backup Case Managers

Case managers are required to identify a backup case manager for each participant on their caseload. The purpose of the backup case manager is to ensure that participants do not have a gap in needed services or support if their primary case manager is not able to provide services. The backup case manager should be listed in the *Contacts* section. Service plans will be rolled back to the case manager if the backup case manager is not listed as required.

CCW Transition Checklist

Over the last several months, the Home and Community-Based Services (HCBS) Section has experienced several situations in which a participant of the CCW has chosen to change case managers. The transition from one case manager to another has caused some confusion and frustration among all case managers

involved. In an effort to clarify responsibilities and facilitate a smooth transition for participants, the HCBS Section has developed a transition checklist that identifies the required steps that need to take place if there is a change in a participant's case manager or a participant's location within Wyoming, as well as the responsible parties for each step. As of October 1, 2022, a completed checklist must be uploaded into the Document Library of the participant's file each time this type of transition occurs.

The Transition Checklist for CCW Services is located in the <u>HCBS Document Library</u> of the HCBS Section website, under the *CCW Case Manager Forms* tab. If you have questions about the checklist, please contact your area BES.

Electronic Process for Corrective Action Plans

The HCBS Section is pleased to announce that the electronic process for submitting corrective action plans (CAPs) is now live! This process follows the same steps outlined in the May 2022 training, but is now available as a task on the provider's task list in the Wyoming Health Provider (WHP) portal. A CAP Guidance Document and video demonstration is available on the HCBS Document Library page of the Division website, under the *Technical Guidance* tab. In addition, if you are issued corrective action, the HCBS Section staff member who issues the corrective action will provide one-on-one intensive assistance to help you through the process. Please note that there will not be a task on your provider task list for a CAP unless you are issued one by the HCBS Section after October 5, 2022.

Provider Certification Expiration Notification in EMWS

Beginning in early October, case managers will receive a notification task in EMWS when a provider that is included on an active plan of care has had their certification expire. The task is just for the case manager's information and should prompt discussion with the provider and the participant to determine if a participant's service plan needs to be modified.

If case managers have questions regarding the notification task, please reach out to your Benefits and Eligibility Specialist. Case managers should contact providers with questions related to the provider's certification status. If a case manager has questions about their own certification status, they should contact the Provider Credentialing Team at wdh-hcbs-credentialing@wyo.gov.

WRAP UP

Next call is scheduled for February 9, 2023.